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APPLICANTS

Hidenobu Nakashima, Aichi, JAPAN;

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**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
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Foreign Priority claimed 35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged /ANTHONY J SALATA/ Examiner's Signature			JAPAN	8	5	1

ADDRESS

OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, L.L.P.
 1940 DUKE STREET
 ALEXANDRIA, VA 22314
 UNITED STATES

TITLE

Hall Display Device for Elevator

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No._____ to charge/credit DEPOSIT ACCOUNT No._____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit